| ORDER FOR SUPPLIES OR SERVICES  |   |       |  |             |              |  |  |  |              | PAGE 1 OF 3                         |                  |   |  |  |
|---|---|-------|--|-------------|--------------|--|--|--|--------------|-------------------------------------|------------------|---|--|--|
|   |   |       |  |             |              |  |  |  |              |                                     |                  |   |  |  |
| 1. CONTRACT PURCH ORDER/AGREEMENT NO. 2. DELIVERY ORDER  DAAE 07 - 01 - D - T 049 0029  |   |       |  |             | /CALL NO.    | 3. DATE OF ORDER/CAL<br>(YYYYMMMDD)<br>20040CT27 |  | 4. REQUISITION/PURCH RE SEE SCHEDULE             |              | QUEST NO. 5. PRIORITY  DOA4         |                  |   |  |  |
| 6. ISSUED BY CODE W56HZV  |   |       |  |             | 7. ADMINIST  |  |  |  | 1103A        | 8. DELIVERY FOB                     |                  |   |  |  |
| TACOM WARREN AMSTA-AQ-ADBX KEITH DEPOORTER (586)574-7405 WARREN, MICHIGAN 48397-5000 EMAIL: DEPOORTK@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL |   |       |  |             |              | 230<br>SUI<br>SMY                                | DCMA ATLANTA<br>2300 LAKE PARK DRIVE<br>SUITE 300<br>SMYRNA GA 30080                             |  |              |                                     |                  | DESTINATION  X OTHER (See Schedule if   |  |  |
| 9. CONTR  | ACTOR   |       |  | CODE        | 09PD1        | SCD: C   |  |  | LIVER TO F   | ADP PT: HQ033<br>OB POINT BY (Date) |                  | other) 11. X IF BUSINESS IS   |  |  |
|   | •   |       |  |             |              | -  | •  | • (YYYYMMMDD)                                    |              |                                     |                  | SMALL   |  |  |
|   | CHARLESTON MARINE CONTAINERS INC. 2301 AVENUE D                 |       |  |             |              |  | SEE SCHEDULE  12. DISCOUNT TERMS   |  |              |                                     |                  | SMALL   |  |  |
| NAME CHARLESTON, SC. 29405<br>AND   |   |       |  |             |              | 1  |  |  | RMS          |                                     | DISADVANTAGED    |   |  |  |
| ADDRESS   | ;   |       |  |             |              |  |  |  |              |                                     |                  | WOMAN-OWNED   |  |  |
|   | •   |       |  |             |              |  | MAIL INVOICES TO THE ADDRESS IN BLOCK  |  |              |                                     | IN BLOCK         |   |  |  |
| 14. SHIP 1  |   | 1081  | INESS: Large Bus   | CODE        | erforming    | 1  | T WILL BE MADE   | See Block 15 WILL BE MADE BY CODE HQ             |              |                                     |                  | MARK ALL  |  |  |
|   | SCHEDULE  |       |  |             |              | DFA<br>DFA<br>P.O                                | DFAS-COLUMBUS CENTER DFAS-CO/SOUTH ENTITLEMENT OPERATION P.O. BOX 182264 COLUMBUS, OH 43218-2264 |  |              |                                     |                  | PACKAGES AND<br>PAPERS WITH<br>IDENTIFICATION<br>NUMBERS IN<br>BLOCKS 1 AND 2 |  |  |
| 16.<br>TYPE   | DELIVERY/<br>CALL   | х     | THIS DELIVERY ORDER  | R IS ISSUED | ON ANOTHER O | GOVERNMENT AG                                    | NT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERE             |  |              |                                     |                  |   |  |  |
| OF<br>ORDER   | PURCHASE  |       | Reference your Oral Written Quotation, Dated  furnish the following on terms specified herein. |             |              |  |  |  |              |                                     |                  |   |  |  |
|   |   |       |  |             |              |  |  |  |              | MBERED PURCHASI<br>AND AGREES TO PE |                  | MAY PREVIOUSLY HAVE<br>ME.  |  |  |
| NAME OF CONTRACTOR SIGNATURE  If this box is marked, supplier must sign Acceptance and return the following number of copies:                         |   |       |  |             |              |  |  | TYPED NAME AND TITLE DATE SIGNED (YYYYMMMDD) es: |              |                                     |                  |   |  |  |
| 17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE  SEE SCHEDULE   |   |       |  |             |              |  |  |  |              |                                     |                  |   |  |  |
|   | 8. ITEM NO. 19. SCHEDULE OF SUPPLIES/SERVICE                    |       |  |             |              |  | 20. QUANTITY 21. 22. UNIT PRICE ORDERED/ UNIT ACCEPTED*  |  |              | 22. UNIT PRICE                      | 23. AMOUNT       |   |  |  |
|   | SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price  KIND OF CONTRACT: |       |  |             |              |  |  |  |              |                                     |                  |   |  |  |
|   |   |       | ly Contracts and   |             |              | AMERICA.   |  |  |              |                                     | 25 TOTAL         | T 40, 000, 12   |  |  |
| same as qu  | accepted by the nantity ordered,                                | indic | cate by X.   | 4. UNITED   |              | NELSON /S  | IGNED/<br>.MIL (586)574  | 1 5250   |              |                                     | 25. TOTAL<br>26. | \$8,222.13  |  |  |
|   | t, enter actual qu<br>rdered and encir                          |       | ity accepted below B   | BY:         | NELSONO®     | TACOM, ARMI                                      | .MIL (300)374  |  |              | RDERING OFFICER                     | DIFFERENCES      | 5   |  |  |
|   | NTITY IN COLU   | 7     |  |             |              | on   |  | . Nomen  |              |                                     |                  |   |  |  |
| INSPECTED RECEIVED ACCEPTED, AND CONFORMS TO CONT<br>b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE   |   |       |  |             |              |  | c. DATE<br>(YYYYMMMD   |  | OF AUTHORIZE | D GOVERNMENT                        |                  |   |  |  |
| e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE  |   |       |  |             |              |  | 28. SHIP. NO.  | 28. SHIP. NO. 29. D.O. VOUCHER NO.               |              |                                     | 30. INITIALS     |   |  |  |
|   |   |       |  |             |              |  |  | 32. PAID BY                                      |              |                                     | 33 AMOUNT V      | ERIFIED CORRECT FOR   |  |  |
| f. TELEPHONE NUMBER g. E-MAIL ADDRESS   |   |       |  |             |              |  | PARTIA FINAL   | PARTIAL PARTIAL                                  |              |                                     |                  |   |  |  |
| 36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT.   |   |       |  |             |              |  | $\dashv$   |  |              |                                     | 34. CHECK NUMBER |   |  |  |
| a. DATE b. SIGNATURE AND TITLE OF CERTIFYING OFFICER  |   |       |  |             |              |  |  | COMPLETE 35. BILL OF                             |              |                                     | 35. BILL OF L    | ADING NO.   |  |  |
| (YYYYMMMDD)   |   |       |  |             |              |  | FINAL  | PARTIAL  |              |                                     |                  |   |  |  |
| 37. RECEIVED AT  38. RECEIVED BY (Print)  39. DATE RECEIVED (YYYYMMMDD)   |   |       |  |             |              | 40. TOTAL CO<br>TAINERS                          | ON-  | 41. S/R ACCOUNT NUMBER 42. S/R VOUC              |              |                                     | IER NO.          |   |  |  |

**CONTINUATION SHEET** 

## Reference No. of Document Being Continued PIIN/SIIN DAAE07-01-D-T049/0029 MOD/AMD

Page 2 of 3

Name of Offeror or Contractor: CHARLESTON MARINE CONTAINERS INC.

| ITEM NO | SUPPLIES/SERVICES   | QUANTITY | UNIT | UNIT PRICE    | AMOUNT     |
|---------|---|----------|------|---------------|------------|
|         | SUPPLIES OR SERVICES AND PRICES/COSTS   |          |      |               |            |
| 0013    | NSN: 8145-01-475-9570<br>FSCM: 19207<br>PART NR: ATPD2298<br>SECURITY CLASS: Unclassified   |          |      |               |            |
| 0013AA  | PRODUCTION QUANTITY   | 3        | EA   | \$2,740.71000 | \$8,222.13 |
|         | NOUN: TRICON I PRON: EH55S803EH PRON AMD: 01 ACRN: AA AMS CD: 060011  |          |      |               |            |
|         | Packaging and Marking PACKAGING/PACKING/SPECIFICATIONS: COMMERCIAL LEVEL PRESERVATION: Commercial LEVEL PACKING: Commercial                                       |          |      |               |            |
|         | Inspection and Acceptance INSPECTION: Origin ACCEPTANCE: Origin   |          |      |               |            |
|         | Deliveries or Performance   |          |      |               |            |
|         | FOB POINT: Origin   |          |      |               |            |
|         | SHIP TO: FREIGHT ADDRESS  (W25N14) XU CONSOL AND CONTAINERIZATION PT  DDSP NEW CUMBERLAND FACILITY  BLDG 2001 CCP DOOR 135 THRU 168  NEW CUMBERLAND PA 17070-5001 |          |      |               |            |
|         | MARK FOR: SR 0003 HQ HHC ARCENT ARIFJAN OPERATION ENDURING FREEDOM AWCF SSF APO AE 09366  |          |      |               |            |
|         | CONTRACT/DELIVERY ORDER NUMBER  DAAE07-01-D-T049/0029   |          |      |               |            |
|         |   |          |      |               |            |

| CONTINUATION SHEET   |              |           |            | Refe                            | <b>Page</b> 3 <b>of</b> 3 |        |            |          |      |           |
|--|--------------|-----------|------------|---------------------------------|---------------------------|--------|------------|----------|------|-----------|
|  | CONTIN       | UATION    | SHEET      | PIIN/SIIN DAAE07-01-D-T049/0029 |                           |        | MOD/AMD    |          |      |           |
| Name of Offeror or Contractor: Charleston Marine Containers Inc. |              |           |            |                                 |                           |        |            |          |      |           |
| CONTRAC  | T ADMINISTRA | TION DATA |            |                                 |                           |        |            |          |      |           |
|  | PRON/        |           |            |                                 |                           |        | JOB        |          |      |           |
| LINE   | AMS CD/      | OBLG      |            |                                 |                           |        | ORDER      | ACCOUNTI | ING  | OBLIGATED |
| <u>ITEM</u>  | MIPR         | ACRN STAT | ACCOUNTING | CLASSIFICATION                  |                           |        | NUMBER     | STATION  |      | AMOUNT    |
| 0013AA   | EH55S803EH   | AA 2      | 97 X4930A  | .C9D 6D                         | 26KB                      | S20113 |            | W56HZV   | \$   | 8,222.13  |
|  | 060011       |           |            |                                 |                           |        |            |          |      |           |
|  |              |           |            |                                 |                           |        |            | TOTAL    | \$   | 8,222.13  |
| SERVICE  | 1            |           |            |                                 |                           |        | ACCOUNTING |          |      | OBLIGATED |
| NAME   | TOTA         | L BY ACRN | ACCOUNTING | CLASSIFICATION                  |                           |        | STATI      | ON       |      | AMOUNT    |
| Army   |              | AA        | 97 X4930A  | .C9D 6D                         | 26KB                      | S20113 | W56HZ      | V        | \$ _ | 8,222.13  |
|  |              |           |            |                                 |                           |        |            | TOTAL    | \$   | 8,222.13  |